

Commercial Building Application for Permit City of Menomonie

Date: _____

Project Address: _____

Owner: _____

Building Estimate \$ _____

Description of Work: _____

General Contractor: _____ Telephone: _____

Mailing Address: _____

Fax #: _____ E-Mail Address: _____

MAIL CHECK AND APPLICATION TO:

CITY INSPECTION DEPARTMENT
800 WILSON AVENUE
MENOMONIE WI 54751

Contact: Telephone #: 715-232-2241 Fax #: 715-235-0888

www.menomonie-wi.gov